

Priority Development Area Application

Use this form to express jurisdictional interest in: a) establishing a new PDA; or b) modifying the boundaries of an existing PDA.

Instructions: Complete this form and send it to pdas@bayareametro.gov along with a GIS shapefile of the PDA boundaries, and any additional attachments, by **July 31, 2023**. Forms may be signed by planning directors or city managers/administrators. Following review of this form by MTC/ABAG staff and additional discussion with applicants if needed, City Council or Board of Supervisors resolutions nominating new PDAs will be required by **September 30, 2023**. Resolutions are not required to modify an existing PDA.

1: APPLICATION TYPE

I want to: ☐ Propose a new PDA ☐ Modify an existing PDA

2: PDA DESIGNATION

Step One: Determine the **designation** for your PDA by reviewing [this map](#). If the area you wish to designate a PDA is not shown as eligible, complete Section 6.

Step Two: Check the appropriate box below:

- ☐ Transit-Rich ☐ Connected Community (Within High Resource Area)
☐ Connected Community (Outside High Resource Area)*

*Also complete VMT-Reduction Letter of Confirmation, available [here](#)

3: TRANSIT ORIENTED COMMUNITIES POLICY APPLICABILITY

Step One: Determine if the area you would like to designate a PDA is within a Transit-Oriented Communities Policy Area by reviewing this map.

Step Two: Check any TOC Policy Areas that apply to the PDA

- ☐ Tier 1 ☐ Tier 2 ☐ Tier 3 ☐ Tier 4 ☐ N/A

Step Three: Confirm that you have reviewed and understand the requirements of the TOC Policy ☐ I have reviewed and understand the TOC Policy

4: GENERAL PDA INFORMATION

City or County: _____ Date: _____

PDA Name: _____ Acres: _____

Staff Contact/Title: _____

Email: _____ Phone: _____

5: PLANNING STATUS

In Progress

Level of Planning Completed for PDA:

9

7

7

9

7

7

9

7

7

9

7

7

****If “None” selected, indicate expected start and completion year:**

6: LAND USE

Planned**

Housing & Jobs

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***Can be based upon buildout in most recently adopted plan, such as the “Project” analyzed in an EIR, or a staff estimate*

7: IF NEEDED - ADDITIONAL TRANSIT INFORMATION

Mode		Status		Agency & Route/Station
<input type="checkbox"/>	Rail	<input type="checkbox"/> Existing	<input type="checkbox"/> Planned	
<input type="checkbox"/>	Ferry	<input type="checkbox"/> Existing	<input type="checkbox"/> Planned	
<input type="checkbox"/>	15 minute bus	<input type="checkbox"/> Existing	<input type="checkbox"/> Planned	
<input type="checkbox"/>	30 minute bus	<input type="checkbox"/> Existing	<input type="checkbox"/> Planned	

7: OPTIONAL - PRIORITY SITES

If the PDA includes one or more planned or potential development site with the capacity

Name	Current Use	Potential Future DU	Potential Future Commercial SF	Approximate % Affordable	Phase

Name & Title:

Signature:

Date:
